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**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  
FY 2005**

Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Docket Number (Optional)

SONYJP 3.0-088

Application Number

09/438,630

Filed

November 12, 1999

For **PROGRAM RECEIVER AND METHOD OF DISPLAY PROCESSING OF PROGRAM EXPLANATION  
SCREEN**

Art Unit 2616

Examiner

Onuaku, Christopher O.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

|   | <u>Fee</u> | <u>Small Entity Fee</u> |           |
|---|------------|-------------------------|-----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120      | \$60                    | \$ 120.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))           | \$450      | \$225                   | \$        |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))         | \$1020     | \$510                   | \$        |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))          | \$1590     | \$795                   | \$        |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))          | \$2160     | \$1080                  | \$        |

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-1095. I have enclosed a duplicate copy of this sheet.I am the ☐ applicant/inventor.☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).☒ attorney or agent of record. Registration Number 36,494☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34 \_\_\_\_\_

Signature

Jonathan A. David  
Typed or printed name

February 7, 2005

Date

(908) 518-6331

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: February 7, 2005

Signature: Jonathan A. David

(Jonathan A. David)

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